

PLEASE CHANGE TO CORRECT NAME

This portion **MUST** be returned with your payment to ensure proper credit. **THANK YOU**

ACCOUNT BILLED
CHIEF GOLD MINES INC CONSOLIDATED MINING Co

PROJECT NAME
CHIEF #2 MINE

PROJECT ID
S230040

DUE DATE	ANNUAL FEE	PAST DUE	AMOUNT DUE	<input type="checkbox"/> FEE NOT ENCLOSED
7/30/1999	\$ 100	\$ 0	\$ 100	Permittee requests an inspection to close out this permit.
TAX ID OR SOCIAL SECURITY #				

DIVISION OF OIL GAS AND MINING
1594 WEST NORTH TEMPLE SUITE 1210
PO BOX 145801
SALT LAKE CITY UT 84114-5801

Change of Address	
Contact	<div>RECEIVED</div> <div>JUL 18 1999</div> <div>DIV. OF OIL, GAS & MINING</div>
Address	
State	
Zip	
Phone	

Please make check payable to:
Division of Oil, Gas and Mining